

ELECTRICAL LICENSE NEW/RENEWAL FORM  
**Independent and Corporate/Company**  
Columbus, Bartholomew County  
Department of Technical Code Enforcement  
440 Third Street, Room 302, Columbus, IN 47201 812-379-1535

FEES: (Payment by Check or Money Order Only)

Renewal Fees: Company/Corporation \$25.00

Independent Contractor \$25.00

Employee \$10.00

New Fees: Company/Corporation/Independent Contractor \$50.00

Employee \$10.00

Renewal due by 1/31/2015

If renewing by mail must be postmarked by 1/31/2015

Current License/Registration Number \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Company/Corporate Name (DBA) \_\_\_\_\_

Business Mailing Address \_\_\_\_\_  
Street City State Zip Code

Business Actual Address \_\_\_\_\_

Business Phone \_\_\_\_\_ Business Fax \_\_\_\_\_

Business Cell# \_\_\_\_\_

Home (Residence) Address \_\_\_\_\_  
Street City State Zip Code

Home Phone \_\_\_\_\_

E-mail Business or Home \_\_\_\_\_

Type of Registration:

Self-employed (Independent) Electrician

Test Date \_\_\_\_\_ Test Score \_\_\_\_\_ Test Location \_\_\_\_\_

Electrical Contractor Corporation/Company . More than one licensed Electrician. List persons having employee licenses, which you are renewing.

1. \_\_\_\_\_ License# \_\_\_\_\_ 5. \_\_\_\_\_ License# \_\_\_\_\_

2. \_\_\_\_\_ License# \_\_\_\_\_ 6. \_\_\_\_\_ License# \_\_\_\_\_

3. \_\_\_\_\_ License# \_\_\_\_\_ 7. \_\_\_\_\_ License# \_\_\_\_\_

4. \_\_\_\_\_ License# \_\_\_\_\_ 8. \_\_\_\_\_ License# \_\_\_\_\_

Please fill out and return an Employee Renewal Form for each employee license.

Applicant Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE SEE REVERSE FOR EMPLOYEE LICENSE RENEWAL FORM**